

Attorney's Docket No BOYKP103US

PATENT

Applicant or Patentee: Sher (Karim) M. Sachedina

Serial or Patent No.: Not Assigned

Filed or Issued: Concurrently Herewith

For: USER INTERFACE AND METHOD TO FACILITATE ANALYSIS AND/OR PLANNING OF BUSINESS OPERATIONS

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) AND 1.27(c))—SMALL BUSINESS CONCERN**

I hereby declare that I am

- ☐ the owner of the small business concern identified below:
- ☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN OKRAA, LLC

ADDRESS OF CONCERN 34530 Applevue Way

Solon, Ohio 44139

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third-party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed, to and remain with the small business concern identified above with regard to the invention, entitled:

SYSTEM AND METHOD FOR ALIGNING CALENDARS

by inventor(s) Sher (Karim) M. Sachedina

described in

- ☒ the specification filed herewith.
- ☐ application serial no. \_\_\_\_\_ filed \_\_\_\_\_
- ☐ patent no. \_\_\_\_\_ issued \_\_\_\_\_

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

*\*NOTE: Separate verified statements are required from each named persons, concern or organization having rights to the invention averring to their status as small entities (37 CFR 1.27).*

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NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small business entity is no longer appropriate (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Sher M. Sachdeva

TITLE OF PERSON OTHER THAN OWNER Member

SIGNATURE [Signature] Date 08/05/2000

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**COMBINED DECLARATION AND POWER OF ATTORNEY  
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT)**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention

entitled: **USER INTERFACE AND METHOD TO FACILITATE ANALYSIS AND/OR PLANNING OF  
BUSINESS OPERATIONS**

the specification of which

- (a) ☒ is attached hereto.  
 (b) ☐ was filed on \_\_\_\_\_ as Serial No. \_\_\_\_\_ or  
 Express Mail No. \_\_\_\_\_, as Serial No. not yet known, and was amended on  
 (if applicable).  
 (c) ☐ was described and claimed in PCT International Application No. \_\_\_\_\_ filed  
 on \_\_\_\_\_ and amended under PCT Article 19 on \_\_\_\_\_ (if any).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations '1.56(a).

**PRIORITY CLAIM**

I hereby claim priority benefits under Title 35, United States Code, '119 of any provisional application, or any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

- (d) ☒ no such applications have been filed.  
 (e) ☐ such applications have been filed as follows.

**EARLIEST FOREIGN OR PROVISIONAL APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35, USC 119
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

**ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

00634723-080500

## POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Himanshu S. Amin, Reg. No. 40,894; Gregory Turocy, Reg. No. 36, 952;  
Christopher P. Harris, Reg. No. 43,660; Eric M. Highman,  
Reg. No. 43,672; and Gary J. Pitzer, Reg. No. 39,334.

The undersigned to this declaration and power of attorney hereby authorizes the U.S. attorney(s) named herein to accept and follow instructions from:

Name(s) of authorized representative(s) \_\_\_\_\_  
Address \_\_\_\_\_

as to any actions to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney(s) and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorney(s) will be so notified by the undersigned.

## Send Correspondence To:

Himanshu S. Amin  
AMIN, ESCHWEILER & TUROCY, LLP  
24<sup>TH</sup> Floor, National City Center  
1900 East 9<sup>TH</sup> Street  
Cleveland, Ohio 44114

Direct Telephone Calls To:  
(name and telephone number)

Himanshu S. Amin  
(216) 696-8730

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued therein.

Full name of sole or first inventor, if any: Sher (Karim) M. Sachedina  
Inventor's signature: [Signature]  
Date: 08/05/2000 Country of Citizenship: U.S.  
Residence: Solon, Ohio  
Post Office Address: 34530 Appleview Way  
Solon, Ohio 44139

Full name of second or joint inventor, if any: \_\_\_\_\_  
Inventor's signature: \_\_\_\_\_  
Date: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_  
Residence: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_

CHECK FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH  
FORM A PART OF THIS DECLARATION

X This declaration ends with this page.

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